GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:3706
ANSWERED ON:24.03.2017
Rural Health Services
Mishra Shri Bhairon Prasad

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the measures taken by the Government last year to rectify the pitiable condition of rural health services;

(b) whether the Government has formulated any scheme to appoint rural healthcare providers; and

(c) if so, the details thereof and the time by which it is likely to be launched?

Answer

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
(a): Public Health being a State subject, the primary responsibility of improving healthcare in their State/UT, including in rural areas, is that of respective State/ UT government. However, National Rural Health Mission (NRHM) was launched in 2005 to supplement the efforts of the State/UT governments to provide accessible, affordable and quality healthcare to rural population throughout the country.Detailed framework for NRHM is at URL http://nhm.gov.in/nhm/nrhm/nrhm-framework-for-implementation.html. NRHM has now been subsumed under the National Health Mission (NHM) as its Sub-Mission, along with National Urban Health Mission (NUHM) as the other Sub-Mission.
Under NHM support is being provided to States/ UTs for strengthening of their healthcare systems based on the proposals submitted by them in their Programme for Implementation Plans (PIPs). The support to States is provided for Reproductive, Maternal, Neonatal, Child & Adolescent Health including support for Universal Immunization Programme- Routine Immunization & Pulse Polio Immunization, Health Systems strengthening including support for ASHAs, Human Resources including AYUSH, Infrastructure, Mobile Medical Units, Ambulances, Drugs, Diagnostics and Equipment, Quality Assurance & Kayakalp, IEC etc. , to provide primary care services to urban population particularly the urban poor and vulnerable population, Control of Communicable Diseases including TB, Leprosy, Vector Borne Disease and disease surveillance, Control of Non Communicable Diseases including Prevention & Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke , Control of Blindness , provision of services for Mental Health, Health Care of Elderly , Tobacco Control and support for salaries of regular Auxiliary Nurse Midwife and Lady Health Visitors etc.

(b) & (c): Public health being a State subject, appointment of healthcare providers falls under the jurisdiction of respective State governments. Government of India has not formulated any separate scheme to appoint rural healthcare providers. However, under NHM support is already being provided to States/UTs, inter alia, for recruitment of health human resource, including for rural areas, on contractual basis, based on their proposals.